

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY-DOCKET NO.
09/042,951	03/17/98	455	2744	RR2154

APPLICANT

KIM CHANG, RICHARDSON, TX; CHENHONG HUANG, PLANO, TX; ROBERT E. DENMAN, PLANO, TX.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

S.T.

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

NONE S.T.

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

S.T. NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/29/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 1	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
Verified and Acknowledged <u>S.T.</u> Examiner's Initials _____ Initials _____					

ADDRESS

ANDREW J. DILLON  
FELSMAN, BRADLEY, GUNTER & DILLON,  
SUITE 350 LAKEWOOD ON THE PARK  
7500B NORTH CAPITAL OF TEXAS HIGHWAY  
AUSTIN TX 78731

TITLE

ENHANCED METHOD AND SYSTEM FOR PROGRAMMING A MOBILE TELEPHONE OVER  
THE AIR WITHIN A MOBILE TELEPHONE COMMUNICATION NETWORK

FILING FEE RECEIVED  \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/042,951	03/17/1998	455	2681	RR2154
APPLICANT KIM CHANG, RICHARDSON, TEXAS; CHENHONG HUANG, PLANO, TEXAS; ROBERT E DENMAN, PLANO, TEXAS.				
**CONTINUING DOMESTIC DATA***** VERIFIED PROVISIONAL APPLICATION 60/039,193 03/17/1997 <u>OK S.T.</u>				
**371 (NAT'L STAGE) DATA***** VERIFIED <u>NONE S.T.</u>				
**FOREIGN APPLICATIONS***** VERIFIED <u>NONE S.T.</u>				
Foreign priority claimed 35 USC 119 (a-d) conditions met		O yes <input type="radio"/> no <input checked="" type="radio"/> O yes <input type="radio"/> no <input type="radio"/> Met after Allowance		
Verified and acknowledged		STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS
<u>TRINH</u> Examiner's Name		TX	1	20
<u>S.T.</u> Initials				3
INDEPENDENT CLAIMS				
ADDRESS BRUCE E. GARLICK GARLICK & HARRISON P.O. BOX 691 SPICEWOOD, , TX 78669-0691				
TITLE ENHANCED METHOD AND SYSTEM FOR PROGRAMMING A MOBILE TELEPHONE OVER THE AIR WITHIN A MOBILE TELEPHONE COMMUNICATION NETWORK				
FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		O All Fees O 1.16 Fees (Filing) O 1.17 Fees (Processing Ext. of Time) O 1.18 Fees (Issue) O Other _____ O Credit _____	
\$**790				